

Data management in the Aurum ART Implementation programme

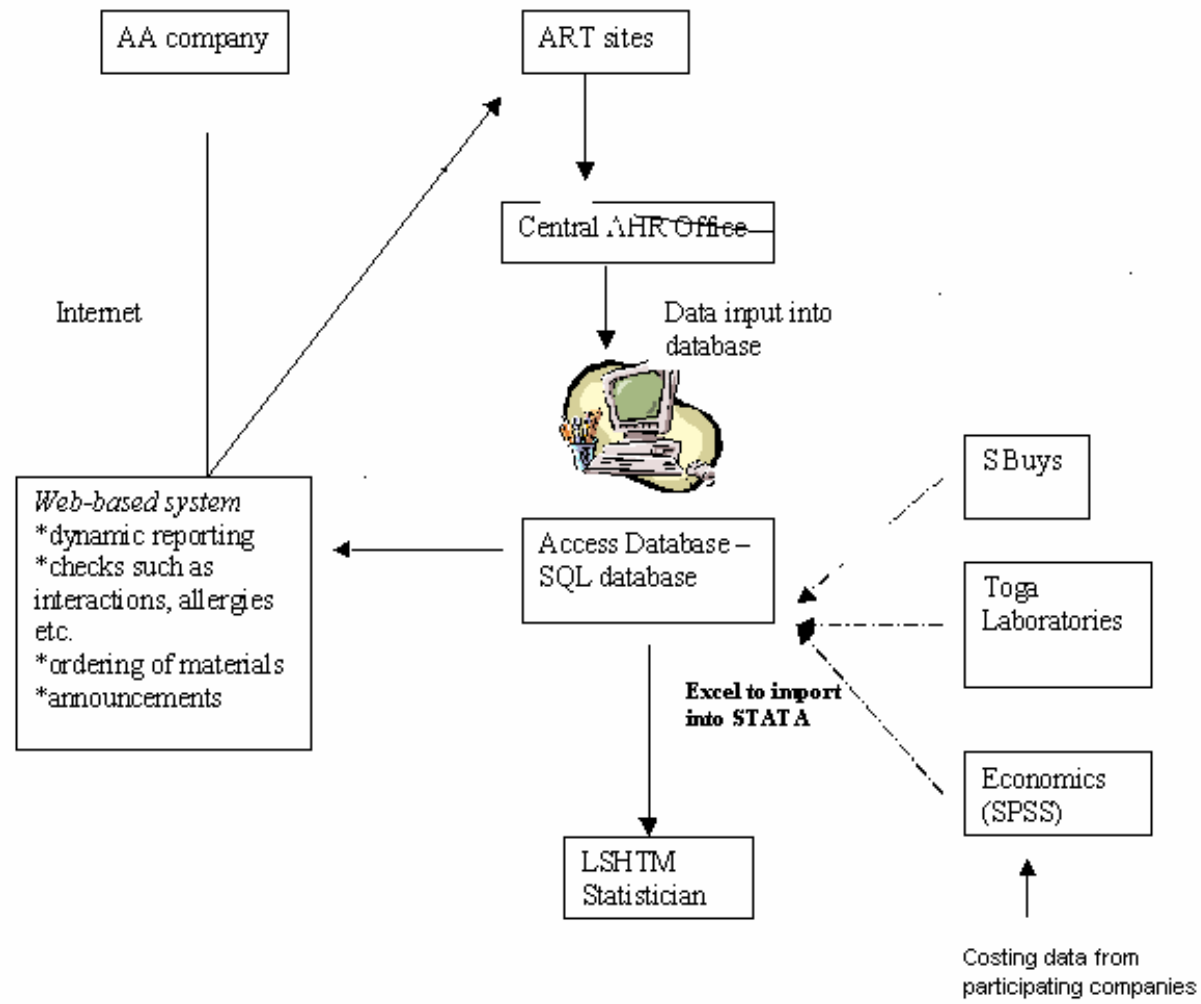


Health Management
Information Systems
Conference

Elements of the system

- ◆ Data forms
- ◆ Administration Manual
- ◆ Database
- ◆ Web-based system
- ◆ STATA analysis for reporting

Information system



Strengths of the system

- ◆ Paper-based: can be implemented anywhere
- ◆ No need for equipment to be put down, problems with security, training of staff etc.
- ◆ Web-based : can be accessed by the users if facilities available
- ◆ Use of data capturers to collect the data
 - Trained individuals, more focused, easier control of data

Additional benefits

- ◆ Paper trail for validation of research results
- ◆ Double entry to ensure accuracy of data
- ◆ Uniform system during the evaluation
- ◆ Easy to transfer to the STATA for data analysis
- ◆ Easy to run queries for adhoc quality control

Data forms

- ◆ Developed over many years with input from clinicians working on the programme
- ◆ Boxes for data entry
- ◆ Coded responses
- ◆ Easy to check that all has been filled in
- ◆ Tracking at bottom of page

WELLNESS CLINIC

CLINIC NO.....	WC	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
COMPANY NO		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
HOSPITAL NO	DH00	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
AGE		<input type="text"/>	<input type="text"/>		
HOSPITAL STICKER					
SEX.....					<input type="checkbox"/>
				1 = Male	2 = Female
DATE OF FIRST VISIT		<input type="text"/>	<input type="text"/>	/	<input type="text"/>
HOW REFERRED TO CLINIC.....					<input type="checkbox"/>
		1 = PHC	2 = Wards/OPD	3 = TB Clinic	4 = PSS
				5 = VCT	6 = Other
CURRENT HOSTEL DWELLER					<input type="checkbox"/>
					1 = Yes
					2 = No
SMOKING HISTORY.....					<input type="checkbox"/>
					1 = Yes
					2 = No
CERTIFIED FOR SILICOSIS					<input type="checkbox"/>
					1 = Yes
					2 = No
HIV ELISA TEST RESULT					<input type="checkbox"/>
					1 = Positive
					2 = Negative
DATE OF FIRST POSITIVE HIV ELISA TEST		<input type="text"/>	<input type="text"/>	/	<input type="text"/>
					11/11/111= Not Applicable/Unknown

Administration manual

- ◆ Explanation of the data entry rules
- ◆ Provides clarity on what is asked with every question
- ◆ Taught on in the training of nurses and referred to in training of doctors

Database

- ◆ Access database – SQL conversion
- ◆ Consistency checks
- ◆ Validation rules
- ◆ Double entry

- ◆ Auditing report
 - Data cleaning

Web-based system

- ◆ Accessed on the internet - No other software needed
- ◆ Password protected
- ◆ Access at sites to:
 - Patient reports
 - Site reports

Monitoring

MONITORING REPORT FOR ART PROGRAMME:

Date:	22 / 09 / 2003
Site Name	Hospital
Site Number:	17
Name of Monitor:	
Name of person in Charge:	

MASTER FILE:

Current Guidelines (June 2003)	Yes
Current Manuals (March 2003)	Yes
Current Consent Forms (20/11/2002)	Yes
Current Counselling Protocols	Yes
Patient Register correct	Yes
Delivery notes correct	N/A
Serious adverse events report correct	Yes

PATIENT FILES:

Correctly filed	100%
Programme consent form correctly signed	100%
Evaluation consent form correctly signed	50%
All blocks filled in	85%
Hospitalizations and outpatients events recorded correctly	100%
Karnofsky score	100%
Adherence recorded correctly	100%
Physical examination done and recorded correctly	100%
Chest X-rays done appropriately	85%
WHO staging correct	95%
Correct lab test done	90%
Correct follow up dates	100%
Adverse events reported correctly	100%
Lab tests recorded	100%



Reporting

❖ Serious adverse events

- Reported to the chairpersons of the steering, ethics & national pharmacovigilance committees and relevant pharmaceutical companies

❖ Quarterly reports

- Uptake of ART
- Side effects and serious adverse events
- Adherence to treatment
- Discontinuation of treatment
- Absenteeism details on patients on treatment
- Costs

Challenges

- ◆ Getting data to clinicians on site
- ◆ Adherence with data entry from sites
- ◆ Pressure for real time data
- ◆ Continuous reporting demands
- ◆ Shift to electronic data capture

Future developments on the system

- ◆ SMS messaging to patients for follow up dates
- ◆ Implementation of intelligence e.g. drug interactions etc.
- ◆ Monitoring of data entry staff
- ◆ Further integration with laboratory and pharmacy
- ◆ Improvement of access to personnel at sites